| | Alley a complete confirmation and applications are compared to the complete |
|--|--|
| | FILED |
| Marcell T Hondrik #AC0021 | |
| Marcell T. Hendrix #ACOUZI Name and Prisoner/Booking Number | ADD 4.0 ass |
| California Health Care Facilit | y APR 1 0 2023 |
| Place of Confinement | CLERK, U.S. DISTRICT COURT |
| 7707 S. Austin Road | BY OF CALIFORNIA |
| Stockton, CA 95312 | DEPUTY CLERK |
| City, State, Zip Code | |
| (Failure to notify the Court of your change of address may result | in dismissal of this action.) |
| | |
| | |
| | |
| IN THE UNITED STAT | TES DISTRICT COURT |
| FOR THE EASTERN DIS | STRICT OF CALIFORNIA |
| | |
| | |
| MARCELL T. HENDRIX |)) |
| (Full Name of Plaintiff) Plaintiff, |) |
| | |
| ν. |) CASE NO. 2:22cv-1319 CKD (PC) |
| (1) CALIF. DEPT. OF CORR. & REHAB. | (To be supplied by the Clerk) |
| (1) CABIT DEIT OF CORR & REHAD, (Full Name of Defendant) | |
| (2) | |
| , 42) |) CIVIL RIGHTS COMPLAINT |
| (3) |) BY A PRISONER |
| |) |
| (4) |) □Original Complaint |
| Defendant(s). |) □First Amended Complaint |
| Check if there are additional Defendants and attach page 1-A listing them. | −) Second Amended Complaint |
| | DEMAND FOR JURY TRIAL |
| | |
| A. JURI | ISDICTION |
| 1. This Court has jurisdiction over this action pursua | ant to: |
| △ 28 U.S.C. § 1343(a); 42 U.S.C. § 1983 | ant to. |
| | E 1 121 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| | vn Federal Narcotics Agents, 403 U.S. 388 (1971). |
| Other: Subtitle A of subtitle | II of the Americans with Disabilities Act 2131 et seq) |
| | |
| 2. Institution/city where violation occurred: | • |
| | |

1

B. DEFENDANTS

| ١. | Name of first Defendant CAL. DEPT. OF CORR. & RE STATE PRISON AGENCY at S | HAB. The first Defendant is employed as: |
|----------|---|--|
| | (Position and Title) | (Institution) |
| | Name of second Defendant:at | The second Defendant is employed as: |
| | (Position and Title) | (Institution) |
| | Name of third Defendant:at | The third Defendant is employed as: |
| | (Position and Title) | (Institution) |
| ١. | Name of fourth Defendant:at | The fourth Defendant is employed as |
| | (Position and Title) | (Institution) |
| l. 2. | Have you filed any other lawsuits while you were a prisoner? If yes, how many lawsuits have you filed? Describe to | |
| | a. First prior lawsuit: 1. Parties: 2. Court and case number: 3. Result: (Was the case dismissed? Was it appealed) | |
| | b. Second prior lawsuit: 1. Parties: | |
| | c. Third prior lawsuit: 1. Parties: N/A v 2. Court and case number: 3. Result: (Was the case dismissed? Was it appealed) | ed? Is it still pending?) |

If you filed more than three lawsuits, answer the questions listed above for each additional lawsuit on a separate page.

D. CAUSE OF ACTION

| CLAIM I | A 06555555110 |
|--|--|
| 1. State the constitutional or other federal civil right that was violated: subtitle I of the Americans with Disabilities Act of 1990 (42 U.S. | A ofssubtitte |
| I of the Americans with Disabilities Act of 1990 (42 0.0. | |
| 2. Claim I. Identify the issue involved. Check only one. State additional issues in separate Disciplinary proceedings ☐ Property ☐ Exercise of religion ☐ Excessive force by an officer ☒ Threat to safety ☐ Other: (2004 ADAAG | ☐ Medical care ☐ Retaliation |
| 3. Supporting Facts. State as briefly as possible the FACTS supporting Claim I. Described Defendant did or did not do that violated your rights. State the facts clearly in your own we authority or arguments. 1) Plaintiff is assigned to the California Health Care located in Stockton, California. This institution was constant California Department of Corrections and Rehabilitation, | rds without citing legal Facility, (CHCF), structed by the |
| California Department of Corrections and Renabilitation, | opinio that |
| urging of the Federal Judiciary, to address the health can had come to the courts attention, most notably through the Plata litigation, to house inmate/patients with mental di- medical disabilities, construction began on the facility in 2011. | sabilities and |
| 2) Subtitle A of subtitle II of the Americans with dis | abilities Act of |
| 1990 (42 U.S.C.§ 12131 et seq) which prohibits discrimina of disability by public entities such as CDCR, is feature the above mentioned cases, as well as the construction of | d prominently in |
| under court order, which was completed in 2013. | |
| 3. Plaintiff is a qualified individual with a disabili | ty, who with or |
| without reasonable modifications to rules, policies or pr moval of architectural, communication, or transportation | actices, the re- barriers, or the continued on pg. 3-A |
| 4. Injury. State how you were injured by the actions or inactions of the Defendant(s) The CDCR commits intentional knowing and wilfull acts against plaintiff, under color of law, a qualified indiv when he is subject to an upper bunk in an ADA/Section 5 cell, to a bunk 5 feet off the ground, far beyond the 17 preferred for this type of cell, the proximate cause of t 3. Administrative Remedies: Violating his ADA protections again a. Are there any administrative remedies (grievance procedures or administrative institution? | and omissions idual with a disabili 04 design Accessible to 19 inches normally he fall injuring plnt nst discrimination. appeals) available at your XXYes \(\subseteq \text{No} \) |
| b. Did you submit a request for administrative relief on Claim I? | 🗓 Yes 🗌 No |
| c. Did you appeal your request for relief on Claim I to the highest level? | 🛛 Yes 🗌 No |
| d. If you did not submit or appeal a request for administrative relief at any level, | briefly explain why you |
| did notN/A | |
| | |

provision of auxiliary aids and services, he meets the essential elegibility requirements for the receipt of services or the participation in programs or activities provided by the public entity, in this instance the CDCR.

4) On August 1, 2021, during the third watch, plaintiff is an inmate/patient assigned to CHCFs, Enhanced Outpatent Program, (EOP), level of

psychiatric care, in the E1E housing unit, in E-Facility.

5) Plaintiff is housed in the upper bunk, in cell | 114, while attempting to mount up to the upper bunk, inmate/patient slips, missteps and falls backward to the floor with a desk beneath him breaking his fall before hitting the floor causing major pain and injury to his back and shoulder.

6) Inmate/patient is housed in an ADA/Section 504 design Accessible cell, dispersed throughout the facility, the appropriate height of the bed in these type of cells is generally 17 to 19 inches from the floor.

7) The intentional, knowing and willful addition of an upper bunk by the CDCR, is inappropriately placed and inappropriately high off of the ground in an ADA/Section 504 Desin Accessible cell, under color of law, which—is the proximate cause of the injury inmate/patient endures.

8) The addition of the upper bunk approximately five feet off the ground, far beyond the 17 to 19 inches generally acceptable for these types of cells, violates the Americans with Disabilities Act and Architectural Barriers Act Guidelines (12004 ADAAG) which is incorporated into the ADA standards for Accessible Design (2010 standards).

9) Public entities, such as the CDCR, shall implement reasonable policies, including physical modifications to additional cells in accordance with the 2010 Standards so as to ensure that each inmate with a disability is housed in a cell with the accessible elements necessary to afford the inmate/patient access to safe, appropriate housing.

10) A public entity, such as the CDCR, may impose legitimate safety requirements necessary for the safe operation of its services, programs, or activities. However, the public entity/CDCR must ensure that its safety requirements are based on actual risks, not on mere speculation, stereotypes, or generalizations about individuals with disabilities., such as plaintiff.

| | | CLAIM II | |
|--|---|--|---|
| 1. | State t | the constitutional or other federal civil right that was violated: U.S Constitution | nal |
| Eig | hth | Amendment | · · · · · · · · · · · · · · · · · · · |
| 2. | ☐ Ba | | dical care aliation |
| local of the total | endant ority o 1) F ated lifor the col hous iliti 2) 90 der o thou val e abo der o thou thou thou thou a di e abo der o thou thou thou a di e abo der o thou solution tivi 4) tien Inju The gains aw, thou ble o refer a. | orting Facts. State as briefly as possible the FACTS supporting Claim II. Describe exact did or did not do that violated your rights. State the facts clearly in your own words with a rarguments. Plaintiff is assigned to the California Health Care Facilin Stockton, California. This institution was constructional Department of Corrections & Rehabilitation, (GDCR), Federal Judiciary, to address the health care eriois the statention, most notably through the Coleman and Plase inmate/patients with mental health disabilities and miss, construction began on the facility in the Spring of Subtitle A of subtitle II of the Americans with Disability U.S.C. § 12131 et seq) which prohibits discrimination is ability by public entities such as CDCk, is featured prove mentioned cases, as well as the construction of CHCF court order, which was completed in 2013. Plaintiff is a qualified individual with a disability, we treasonable modifications to rules, policies or practice of architectural, communication, or transportation barriation of auxiliary aids and services, he meets the essentium of auxiliary aids and services or the participation ties provided by the public entity/CDCR. On August 1, 2021, during the third watch, plaintiff is a gualified individual with a disability, when he is placed in an upper bunk, in an ADA/Section 50 ac CDCR commits intentional, knowing and wilful acts and a CDCR commits intentional, knowing and wilful acts and acts and acts that the proximate cause of the fall injuring plaintiff in the proximate cause of the fall injuring plaintiff heart when the is placed in an upper bunk, in an ADA/Section 50 acts, the proximate cause of the fall injuring plaintiff heart when the subject of the floor, far beyond the 17 to 19 inches and the cause of the fall injuring plaintiff heart when the subject of the floor, far beyond the 17 to 19 inches and the subject of the floor, far beyond the 17 to 19 inches and the subject of the floor, far beyond the 17 to 19 inches and the subject of the floor of the fall inju | noutciting legal lity, (CHCF), ted by the at the urging at had come to ta litigation, dedical dis- 2011. ties Act of non the basis frominently in by the CDCR, who with or ces, the re- iers, or the ial elegibility in programs or an inmate/ , level of g. 4-A d omissions under color of the design Acces the generally f demonstrating alth and safety available at your X Yes \(\) No X Yes \(\) No |
| | C. | | |
| | d. | If you did not submit or appeal a request for administrative relief at any level, briefly did not. | explain why you |
| | | N/A | |

psychiatric care, in the E1E housing unit, in E-Facility.

5) Plaintiff is housed in the upper bunk, in cell #114, while attempting to mount up to the upper bunk, inmate/patient slips, missteps and falls backward to the floor with a desk beneath him breaking his fall before hitting the floor causing major pain and injury to his back and shoulder.

6) Inmate/patient is housed in an ADA/Section 504 design Accessible

6) Inmate/patient is housed in an ADA/Section 504 design Accessible cell, dispersed throughout the facility, the appropriate height of the bed in these type of cells is generally 17 to 19 inches from the floor.

7) The intentional, knowing and willful addition of an upper bunk by the CDCR, is inappropriately placed and inappropriately high off of the ground in an ADA/Section 504 Design Accessible cell, under color of law, which is the proximate cause of the injury inmate/patient endures.

8) The addition of the upper bunk approximately five feet off the ground, far beyond the 17 to 19 inches generally acceptable for these types of cells, violates the Americans with Disabilities Act and Architectural Barriers Act Guidelines (2004 ADAAG) which is incorporated into the ADA standards for Accessible Design (2010 standards).

9) Public entities, such as the CDCR, shall implement reasonable policies, including physical modifications to additional cells in accordance with the 2010 Standards so as to ensure that each inmate with a dischility is beyond in a call with according to the contract of the contract of

ability is housed in a cell with accessible elements necessary to afford the inmate/patient access to safe, appropriate housing.

10) A public entity, such as the CDCR, may impose legitimate safety requirements necessary for the safe operation of its services, programs, or activities. However, the public entity/CDCR must ensure that its safety requirements are based on actual risks, not on mere speculation, stereotyoes, or generalizations about individuals with disabilities, such as the plaintiff.

| | | | N/A | | | ' |
|--------------------|---|--|--|-----------------------|----------------|---------------------|
| | did not. | | | | | |
| d. | If you did not submit or app | | _ | | | |
| о. с. | Did you appeal your request | • | | 9 | X Yes | |
| b. | Did you submit a request fo | or administrative rel | ief on Claim III2 | | X Yes | □ No |
| susta a. | ins on August 15, 2 ministrative Remedies. na Are there any administrative institution? | UZI, violating tion due to he remedies (grievance) | ng his ADA prote his disability. e procedures or adminis | trative appeals) | available a | it your |
| | | | | | | |
| law. y | when he is placed i | n a cell that | does not have | an impleme | | Silut |
| Th | e CDCR commits inte | ntional, know | ing and willful | acts and | ınder c | OTOL OF |
| 4. Inj | ury. State how you were inju | red by the actions o | r inactions of the Defen | dant(s). | | |
| requi | rements for the rec | eipt of servi | ces of the part | continued of | on pg 5 | -A |
| provi | of architectural, sion of auxiliary a rements for the rec | ids and servi | ces, he meets t | he essent | ial ele | gibilit grams (|
| witho moval | ut reasonable modif of architectural, | communication | , or transporta | tion barr | iers, o | r the |
| - 3) | -Plaintiff-is a mua | lified indivi | dual with a dis | ability, I | <u>who wit</u> | h or |
| CHER | CONTRE CAURT ARTAR | which was con | mleted in 2013. | | | |
| hacie | of disability by pe above mentioned c | ublic entitie | s such as CDCK. | is leatur | ea pro | mın entı |
| 1000 | (1/2 II C C 8 12131 | at seal which | h prohibits dis | criminatio | on on t | ne . |
| of 20 | 11. Subtitle A of subt | :+10 TT of th | e Americans wit | h Disabili | ties A | ct of |
| and me | edical disabilities | , construction | n began on the | facility i | n the | Spring |
| Plata | ome to the courts a litigation, to how | se inmate/bat | <u>lents with ment</u> | ar nearth | UIS a DI | TILLES |
| uraine | of the Kederal III | dictary to a | ddress the heat | th care cr | 1818 U | nat. |
| Calif | ed in Stockton, Cali ornia Department of | Corrections | Rehabilitatio | n, (CDCR), | at the | |
| 1) | Plaintiff is assign | ned to the Ca | lifornia Health | Care Faci | lity, (| (CHCF), |
| authority | or arguments. | | | | • | Ū |
| 3. Sup Defendai | porting Facts. State as briefly nt did or did not do that violate | y as possible the FA | C1S supporting Claim II the facts clearly in your | II. Describe exa | actly what | each |
| | | 21.1.1.54 | omo i oi i | | | |
| □ E | Excessive force by an officer | • • | Other: (2004 AI | | | rds) |
| | Disciplinary proceedings | ☐ Property | ☐ Exercise of religio | | aliation | |
| _ | Basic necessities | ☐ Mail | ☐ Access to the cour | | dical care | |
| 2. Clai | m III. Identify the issue invo | lved. Check only o | ne. State additional issu | ies in senarate c | laims | |
| of the | Americans with Dis | <u>abilities Act</u> | of 1990 (42 U. | S.C. § 121 | L31 et | seq) |
| 1. State | the constitutional or other fe | deral civil right that | was violated: subtitl | e A of sub | title | II \ |
| | | CLAIM | III | | | |

If you assert more than three Claims, answer the questions listed above for each additional Claim on a separate page.

activities provided by the public entity/CDCR.

4) On August 15, 2021, during the second watch/third watch shift change, approximately 1:30/1:40 p.m., inmate/patient is housed in cell #222, in the E1E housing unit, in the Enhanced Outpatient Program, (EOP), in the E-Facility at CHCF, when, while attempting to close the door to his cell, plaintiff injures his fingers.

5) The doors throughout the E1-E-Facility, EOP housing units B through E, do not have a door knob or any indentation on the inside of the door

to shut the door safely from inside the cell.

6) The inmate/patient must place his hand at the edge of the door, then swing the door shut, hoping that he can remove his hand from between the closing door and the door jamb, without injuring himself should he

not move his hand quick enough performing this manoever.

7) Plaintiff alleges that the CDCRs intentional, knowing and wilfull omission of providing an aid or implement, door knob, indentation or the like, for inmate/patients to safely shut their door, without being subject to possible injury, under color of law, is the proximate cause of the injury he sustains on August 15, 2021, violating the Americans with Disabilities Act and Architectural Barriers Act Guidelines (2004 ADAAG), which is incorporated into the ADA Standards for Accessible Design (2010 Standards)

8) Public entities, such as the CDCR, shall implement reasonable policies, including physical modifications to additional cells in accordance with the 2010 Standards so as to ensure that each inmate with a disability is housed in a cell with accessible elements necessary to

afford the inmate/patient access to safe, appropriate housing.

9) A public entity, such as the CDCR, may impose legitimate safety requirements necessary for the safe operation of its services, programs, or activities. However, the public entity/CDCR must ensure that its safety requirements are based on actual risks, not on mere speculation, stereotypes, or generalizations about individuals with disablities, such as the plaintiff.

| | | CLAIM | IV | | |
|--------------|---|--------------------------------|----------------------------|-------------------------------|----------------------|
| 1. State th | ne constitutional or other federal c AMENDMENT | ivil right that was | violated: U.S. CONS | STITUTIONAL | |
| | IV | 21 1 | _ | | |
| 2. Claim | Identify the issue involved. (| | State additional issues | · | |
| ☐ Bas | sic necessities \square M | lail 🗌 | Access to the court | Medical car | е |
| ☐ Dis | ciplinary proceedings P | roperty 🔲 | Exercise of religion | ☐ Retaliation | |
| ☐ Ex | cessive force by an officer 🖈 T | | - | | |
| | | | TV | | |
| 3. Suppo | rting Facts. State as briefly as po- | ssible the FACTS | | Describe exactly wha | at each |
| Defendant | did or did not do that violated your | rights. State the f | facts clearly in your own | n words without cit in | g legal |
| authority or | arguments. | | | | |
| <u>!)</u> I | Plaintiff is assigned t | o the Cali | fornia Health C | are Facility, | (CHCF), |
| locted | in Stockton, Californi | a. This ins | stitution was c | onstructed by | the |
| Califor | nia Department of Corr | ections & l | Rehabilitation, | (CDCRII, at the | ne |
| urging | of the Federal Judicia | ary, to add | ress the health | the Coloman | and |
| nad col | me to the courts attend Litigation, to house in | mate/patie | ats with mental | health disah | ilities |
| and med | lical disabilities, con | struction | began on the fa | cility in the | Spring |
| of 201 | [• | | • | | |
| 2) | Subtitle A of subtitle | II of the | Americans with | Disabilities | Act of |
| 1990 (| 42 U.S.C. § 12131 et s | seq) which | prohibits discr | imnation on t | he basis |
| of dis | ability by public enti | ties such a | s CDCR, is feat | ured prominen | tly in |
| the ab | ove mentioned cases, as under court order, which | s well as, | the construction | II OI CHCE Dy | |
| CDCK, | Plaintiff is a qualific | on was comp | al with a disab | ility. Who wi | th or |
| withou | t reasonable modificati | ions to rul | es, policies or | practices, t | he re- |
| moval | of architectural, comm | unication, | or transportati | on barriers. | <u>or th</u> e |
| provis | ion of auxiliary aids | and service | <u>s, he meets the</u> | essential el | egibility |
| requir | ements for the receipt | of service | s or the partic | ipation in pr | ograms or |
| | | | | inued on pg 6 | -A |
| | y. State how you were injured by | | | | |
| The C | DCR commits intentions | l, knowing | and wilfull ac | ts and omissi | nns |
| GEGINSI | Dialikie, a malified | Individual | trith a diashi | 1 | |
| wnen ne | is placed in a cell th | at does not | have an imple | ment to shut | the d oor |
| | rom ruside the cell. | ne proximat | 'A Causa of ini | ince he ending | |
| | | | | | |
| a. | Are there any administrative fence | प्रदेश हैं कि एक प्रमुख कि हो। | eedures or administrat | ive appeals) availabl | e at your |
| | institution? | | IV | ☐ Yes | □ No |
| b. | Did you submit a request for admi | nistrative relief o | | X Yes | □ No |
| С, | Did you appeal your request for re | lief on Claim 🗯 | to the highest level? | 🛚 Yes | □ No |
| d. | If you did not submit or appeal a r | equest for admin | istrative relief at any le | evel, briefly explain | why you |
| | did not. | | | | |
| | | N/A | | | |

If you assert more than three Claims, answer the questions listed above for each additional Claim on a separate page.

activities provided by the public entity/CDCR.

4) On August 15, 2021, during the second watch/third watch shift change, approximately 1:30/1:40 p.m., inmate/patient is housed in cell #222, in the E1E housing unit, in the Enhanced Outpatient Program, (EOP), in the E-Facility at CHCF, when, while attempting to close the door to his cell, plaintiff injures his fingers.

5) The doors throughout the E1-E-Facility, \$\(\frac{1}{2}\)EOPShowsing white Bithrough E, do not have a door knob or any indentation on the inside of the door

to shut the door safely from inside the cell.

6) The inmate/patient must place his hand at the edge of the door, then swing the door shut, hoping that he can remove his hand from between the closing door and the door jamb, without injuring himself should he

not move his hand quick enough performing this manoever.

7) Plaintiff alleges that the CDCRs intentional, knowing and wilfull omission of providing an aid or implement, door knob, indentation or the like, for inmate/patients to safely shut their door, without being subject to possible injury, under color of law, is the proximate cause of the injury he sustains on August 15, 2021, violating the Americans with Disabilities Act and Architectural Barriers Act Guidelines (2004 ADAAG), (2010 Standards).

8) Public entities, such as the CDCR, shall implement reasonable policies, including physical modifications to additional cells in accordance with the 2010 Standards so as to ensure that each inmate with a disability is housed in a cell with accessible elements necessary to

afford the inmate access to safe, appropriate housing.

9) A public entity, such as the CDCR, shall implement reasonable requirements necessary for the safe operation of its services, programs, or activities. However, the public entity/CDCR must ensure that its safety requirements are based on actual risks, not on mere speculation, stereotypes, or generalizations about individuals with disabilites, such as the plaintiff.

E. REQUEST FOR RELIEF

| State the relief you are seeking: | | | _ | c + = / | | |
|--|------------------------|----------|-----------|---------|---------|-----|
| 1. Compensatory damages again | st defendant | in the a | mount o |) | 7,00.00 | 1 |
| 2. Punitive damages against d | erendant in t | ne amour | IL OI \$2 | 20,00 | .00. | |
| 3. For costs and reasonable a | ttorneys lees | | | | | |
| 4. Defendant is sued in offic 5. For such further relief as | the court de | ems pro | er. | | | |
| | | | | | | |
| JURY DEMAND | | : | | | | |
| | | | | | | / |
| I declare under penalty of perjury that the foregoing | g is true and correct. | | | 11 | | // |
| - 4-1-2023 | | MIMAG | a 1 1/ | 1 /K | DIAL | / 2 |
| Executed on 4-6-2023 | - | 1 V VVV | | 1 | THU | /(|
| DATE | | SIGNA | TURE OF | PLAIN | TIFF | |
| | • | | | | | |
| | | | | | | |
| Ole as and title of navelened local positions on | | | | | | |
| (Name and title of paralegal, legal assistant, or | | | | • | | |
| other person who helped prepare this complaint) | | | | | | |
| | | | | | | |
| | | | | | | |
| (Signature of attorney, if any) | | | | | | |
| (Signature of attorney, it arry) | | | | | | |
| | • | | | | * | |
| | | | | | | |
| | • | | | | | |
| (Attorney's address & telephone number) | • | | | | | |
| () | | | | | | |

ADDITIONAL PAGES

All questions must be answered concisely in the proper space on the form. If you need more space you may attach more pages, but you are strongly encouraged to limit your complaint to twenty-five pages. If you attach additional pages, be sure to identify which section of the complaint is being continued and number all pages. Remember, there is no need to attach exhibits to your complaint.

Case 2:22-cv-01319-TLN-CKD Document 14 Filed 04/10/23 Page 12 of 13

PROOF OF SERVICE BY MAIL [CCP §§ 1013(a), 2015.5]

STATE OF CALIFORNIA, COUNTY OF SAN JOAQUIN

I am a citizen of the County of SAN JOAQUIN, State of California. I am a citizen of the United States of America. I am over the age of eighteen (18) and not a party to this action. I am a resident of the County of San Joaquin, CDCR#AG0021.

My address is: 7707 S. Austin Road

California Health Care Facility
P.O.BOX 213040; E1E-#222

Stockton, Ca 95213

On April 6, 2023, 20 , I served via United States Mail a copy of the following document(s):

SECOND AMENDED COMPLAINT

The above-noted legal document(s) was placed in a sealed envelope, with postage thereon fully prepaid, addressed to the person at the address indicated below pursuant to California Code of Civil Procedure Section 1013. I placed the envelope or package in a mailbox or other like facility addressed to:

HONORABLE CAROLYN K. DELANEY UNITED STATES COURTS OFFICE OF THE CLERK UNITED STATES DISTRICT COURT EASTERN DISTRICT OF CALIFORNIA SACRAMENTO DIVISION

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge. This document was executed on April 6, 2023 in San Joaquin County, California.

Marcell T. Hendrix
Type or Print Name

Signature

501 I St., Ste. 4-200

MARCELI T. Hender Acoo21 (CHCF) FACILITY E, ELE-2221 P.O. Box 213040 Stockton, CA. 95213